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
## How' You Doin' in 2003

### Infection Control

April 7, 2003

#### Instructions:

- ☐ Test your knowledge by asking yourself and at least 5 of your colleagues the following questions.
- ☐ Indicate in the boxes whether you **answered the question correctly (Y)** or **were not able to answer the question (N)**. Your manager or supervisor will be able to provide you with the correct answers.
- ☐ Give yourself and your colleagues a pat on the back for a job well done!!! Then, **send the results to Ginnie Daine by April 18, 2003.**
- ☐ Got questions and you and your staff want to discuss a topic, simply check the box to the left of the topic.

	Critical Issue	1	2	3	4	5	6
	1. What is the goal of infection control and prevention?						
	2. What infection control measures do you use every day in your job?						
	3. How do you know what isolation a patient requires?						
	4. You have just received word that your PCU will be receiving a patient admitted to "rule out" tuberculosis. Discuss what actions you will take to prepare for this patient.						
	5. Where do you get personal protective barrier equipment?						
	6. Where can you find information about smallpox or SARS?						
	7. What do you do in the event of exposure to human blood or body fluids?						
	8. How do you identify a patient with a known history of resistant bacteria?						
	9. What employee health evaluations are important to CC staff?						
	10. Describe the safety equipment used in the CC to prevent needle stick injuries.						

- ☐ **We would like to discuss this topic further with someone!! (check box if indicated)**

## How' YOU Doin' in 2003?

### The Answer Sheet☺

#### Infection Control

April 7, 2003

1. What is the goal of infection control and prevention?
  - ▶ The goal of infection control and prevention is to identify and prevent the transmission of infections among patients, staff, and visitors.
  - ▶ The Hospital Epidemiology Service (HES) is your resource for infection control issues and can be reached by calling 6-2209 or, by calling the pager operator.
  - ▶ The Hospital Infection Control Committee oversees the hospital-wide activities related to infection control.
2. What infection control measures do you use every day in your job?
  - ▶ **Hand washing** is employed when hands are visibly soiled. Hand washing is advocated before and after seeing a patient and before preparing medications and foods.
  - ▶ **Waterless hand sanitizers** - are available for routine hand sanitizing when hands are not visibly soiled. If your hands are visibly soiled, thorough hand washing should be employed using water and a CC-approved soap.
  - ▶ **Universal Precautions** is an infection control strategy used to reduce the risk of transmitting blood-borne pathogens. Universal Precautions are applied to all patients, visitors, and situations that have the potential for exposure to blood and bodily fluids. You might find this NPCS policy helpful (<http://intranet.cc.nih.gov/nursing/univer.html>).
  - ▶ **Isolation Guidelines** are used for infections of epidemiologic importance, ie., there is the potential for transmitting to another person. CC Isolation Guidelines have been developed based on recommendations from the Centers for Disease Control.
  - ▶ **Personal Protective Equipment (PPE)** is made available to you in all patient care areas, e.g., gloves, gowns, masks, shoe covers.
3. How do you know what isolation a patient requires?
  - ▶ The CC Isolation Guidelines Flipchart (Rev. 1998) should be located in a prominent location in your patient care unit. Can you find it?
  - ▶ The CC Isolation Guidelines Flipchart is being updated by HES in 2003 and will be distributed to all patient care units in the fall . . . keep an eye out!
  - ▶ The Isolation Guidelines Flipchart provides information on the following isolation elements:
    - Isolation precautions appropriate for infectious syndromes
    - Room guidelines (private vs. semi-private, negative airflow, etc.)
    - Personal protective equipment (PPE) required (gown, gloves, masks, shoe coverings)
    - Environmental cleaning guidelines
    - Nutrition, transportation, and equipment management guidelines
    - Guidelines for discontinuing isolation precautions
    - What other information can you find??
4. You have just received word that your PCU will be receiving a patient admitted to "rule out" tuberculosis. Discuss what actions you will take to prepare for this patient.
  - ▶ The CC Isolation Guidelines Flipchart indicates the patient should be placed on Respiratory Isolation Level Three and this means:
    - Contact HES (6-2209).
    - Arrange for a negative airflow room to prevent transmission through the air. Negative airflow rooms are located on 10D, 11W, 12W, and 13W.
    - Facilitate the entry of medical orders for isolation into MIS so that isolation information is electronically sent to all patient care departments, e.g., Nutrition, Radiology.
    - Place a "Respiratory Isolation Level Three" sign on the patient door.

**(THERE'S MORE ON THE NEXT PAGE!!!)**

<ul style="list-style-type: none"> <li>▪ Order an isolation cart from CHS by calling 6-2243 or placing a MIS-O-GRAM.</li> <li>▪ Place an isolation label on the patient's chart.</li> <li>▪ Review medical orders for appropriate isolation precautions and the plan of care to rule out tuberculosis, i.e., chest x-ray, induced sputum sampling, etc.</li> <li>▪ Can you think of other things you might do?</li> </ul>
<p>5. Where do you get personal protective barrier equipment?</p> <ul style="list-style-type: none"> <li>▶ PPE is obtained from CHS. Items can be ordered as needed using the Visual Supply Catalog.</li> <li>▶ Additionally, isolation carts are available from CHS by calling 6-2243 or placing a MIS-O-GRAM. Here is additional information about the carts you might find useful: <ul style="list-style-type: none"> <li>▪ The isolation carts isolation supplies such as gowns, gloves, masks, and shoe coverings.</li> <li>▪ It is the responsibility of the unit nurse to order and restock the isolation carts while the cart is in use on the unit.</li> <li>▪ When the isolation cart is no longer needed, simply place a MIS-O-GRAM and the cart will be picked up by CHS staff.</li> <li>▪ If you need an isolation cart in the middle of the night, CHS maintains 2-3 carts next to the night cart supplies.</li> </ul> </li> </ul>
<p>6. Where can you find information about smallpox or SARS?</p> <ul style="list-style-type: none"> <li>▶ CDC website <a href="http://www.cdc.gov/">http://www.cdc.gov/</a> and <a href="http://www.who.int">www.who.int</a>.</li> <li>▶ You can also receive additional information and updates regularly by going to the CDC website and signing up to receive email alerts for clinicians.</li> </ul>
<p>7. What do you do in the event of exposure to human blood or body fluids?</p> <ul style="list-style-type: none"> <li>▶ <b>Take immediate first aid measures.</b> <ul style="list-style-type: none"> <li>▪ If you experience a needle stick injury, it is <b>strongly</b> recommended by CDC that the health care worker <b>immediately</b> employ a 15' povidone iodine scrub.</li> <li>▪ If you experience a mucous membrane exposure (eye or mouth), it is <b>strongly</b> recommended that the health care worker immediately employ a copious rinse using a sterile 0.9% sodium chloride solution. You will need assistance from a fellow employee to accomplish this. In patient care areas where eye wash equipment may not be available, OMS recommends spiking a 1 liter bag of normal saline with IV tubing and rinsing with the full bag.</li> </ul> </li> <li>▶ <b>Call OMS (6-4411) immediately.</b> Again, a fellow employee can do this for you while first aid is being rendered. <ul style="list-style-type: none"> <li>▪ During the week and until 5:00 p.m., you are to go to OMS (OP6).</li> <li>▪ After 5:00 p.m. and on weekends and holiday, you call the Page Operator <b>immediately</b> and ask for the OMS on-call medical personnel.</li> </ul> </li> <li>▶ <b>OMS personnel will:</b> <ul style="list-style-type: none"> <li>▪ Assist you in completing and/or repeating the required first aid.</li> <li>▪ OMS will notify your supervisor of the exposure and will request the name of the patient source, their history of potential communicable disease, and request that the ordering of lab tests be facilitated.</li> <li>▪ If Post-Exposure Prophylaxis (PEP) is indicated, it is the goal of OMS personnel to have this initiated within 2 hours of exposure. PEP and appropriate follow-up is provided by OMS until completion of the PEP.</li> </ul> </li> <li>▶ <b>Occurrence Reporting System (ORS) is filed.</b></li> </ul>
<p>8. How do you identify a patient with a known history of resistant bacteria?</p> <ul style="list-style-type: none"> <li>▶ The Communicable Disease History admission screens</li> <li>▶ HES maintains and distributes a list to nurse managers monthly.</li> </ul>
<p>9. What employee health evaluations are important to CC staff?</p> <ul style="list-style-type: none"> <li>▶ As a new employee working in Building 10, proof of the following is required: <ul style="list-style-type: none"> <li>▪ <b>TB Surveillance Program</b> - prior to EOD and then every 6 months for patient care providers, TB exposure status is assessed. For those employees with a positive PPD, a chest x-ray is obtained and appropriate treatment or referral is provided. This is important because of the many immunocompromised patients we see at the Clinical Center.</li> </ul> </li> </ul> <p><b>(THERE'S MORE ON THE NEXT PAGE!!!)</b></p>

- **Varicella (Chicken Pox)** - proof of vaccination required and then, a baseline titer is drawn. If the titer is negative, the employee is offered the vaccination.
- **Rubeola (Measles)** - proof of vaccination required and then, a baseline titer is drawn. If the titer is negative, the employee is offered the vaccination.
- **Hepatitis B Series** - proof of vaccination required and then, a baseline titer is drawn. If the titer is negative, the employee is offered the vaccination series.
- ▶ Additionally, because we work with many immunocompromised patients, all CC employees are **strongly** encouraged to receive the influenza vaccination offered annually during flu season.

10. Describe the safety equipment used in the CC to prevent needle stick injuries.

- ▶ Protected needle and needle-less systems
- ▶ Sharps Containers
- ▶ Glass bottle disposal bag